| | For receiving Office use only | |
|---------------------------|---------------------------------|----------|
| | | |
| International Application | on No. | |
| | | |
| | | |
| International Filing Da | te | |
| 1 | | |
| | | |
| Name of receiving Off | ice and "PCT International Appl | ication" |

REQUEST The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty. Applicant's or agent's file reference INEM/ P28778PC (if desired) (12 characters maximum) TITLE OF INVENTION Box No. I REDUCTION OF THE CONCENTRATION OF UNDESIRED COMPOUNDS APPLICANT This person is also inventor Box No. II Telephone No. Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) Ineos Fluor Holdings Limited Facsimile No. PO Box 13 The Heath Teleprinter No. Runcom Cheshire WA7 4QF Applicant's registration No. with the Office United Kingdom State (that is, country) of nationality: State (that is, country) of residence: GB GB all designated States except the States indicated in the United States all designated This person is applicant the United States of America of America only the Supplemental Box States for the purposes of: FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S) Box No. III This person is: Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) applicant only BROWN, Samantha Jayne applicant and inventor 47 Gordale Close Winnington inventor only (If this check-box Northwich is marked, do not fill in below) Cheshire CW8 4XT Applicant's registration No. with the Office United Kingdom State (that is, country) of nationality: State (that is, country) of residence: GB GB all designated States except the United States the States indicated in all designated This person is applicant X the United States of America of America only the Supplemental Box for the purposes of: States Further applicants and/or (further) inventors are indicated on a continuation sheet. X AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE Box No. IV The person identified below is hereby/has been appointed to act on behalf common \mathbf{X} agent representative of the applicant(s) before the competent International Authorities as: Name and address: (Family name followed by given name; for a legal entity, full official designation. Telephone No. The address must include postal code and name of country.) (0115) 9552211 Stevens, Ian Facsimile No. Eric Potter Clarkson (0115) 9552201 Park View House 58 The Ropewalk Teleprinter No. Nottingham 37540 Potter G NG1 5DD Agent's registration No. with the Office England Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

Sheet No ..2..

| Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S) | | | | |
|--|---|--|--|--|
| If none of the following sub-boxes is used, this sheet should not be included in the request. | | | | |
| Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) | This person is: | | | |
| CORR, Stuart 31 Foxhills Close | X applicant and inventor | | | |
| Appleton Warrington Cheshire | inventor only (If this check-box is marked, | | | |
| WA4 5DH United Kingdom | Applicant's registration No. with the Office | | | |
| State (that is, country) of nationality: GB State (that is, country) | ry) of residence: GB | | | |
| This person is applicant for the purposes of: all designated States all designated States of America | the United States of America only the States indicated in the Supplemental Box | | | |
| Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) This person is applicant only | | | | |
| LOW, Robert Elliott "Longmeadow" | X applicant and inventor | | | |
| Ffordd y Pentre Nercwys | inventor only (If this check-box is marked, | | | |
| Flintshire CH7 4EL | Applicant's registration No. with the Office | | | |
| United Kingdom | | | | |
| State (that is, country) of nationality: GB State (that is, country) | ry) of residence: GB | | | |
| This person is applicant for the purposes of: all designated States all designated States when the United States of America | the United States of America only the States indicated in the Supplemental Box | | | |
| The state of the s | | | | |
| Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) | This person is applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below) Applicant's registration No. with the Office | | | |
| The address must include postal code and name of country. The country of the address indicated in this | applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below) Applicant's registration No. with the Office | | | |
| The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) | applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below) Applicant's registration No. with the Office | | | |
| The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) State (that is, country) of nationality: State (that is, country) This person is applicant all designated States except | applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below) Applicant's registration No. with the Office the United States the States indicated in | | | |
| The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) State (that is, country) of nationality: This person is applicant all designated States all designated States except for the purposes of: Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this | applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below) Applicant's registration No. with the Office the United States of America only the Supplemental Box This person is applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below) Applicant's registration No. with the Office | | | |
| The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) State (that is, country) This person is applicant all designated States the United States except the United States of America Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) | applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below) Applicant's registration No. with the Office the United States of America only the Supplemental Box This person is applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below) Applicant's registration No. with the Office | | | |
| The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) State (that is, country) of nationality: This person is applicant all designated States the United States except the United States of America. Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) State (that is, country) of nationality: State (that is, country) all designated States all designated States except all designated States except. | applicant and inventor inventor only (If this check-box is marked, do not fill in below) Applicant's registration No. with the Office the United States of America only the Supplemental Box This person is applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below) Applicant's registration No. with the Office the United States the States indicated in when the Office the United States the States indicated in | | | |

| | | _ |
|----|---------|----|
| CL | N . | 3. |
| | | |

| Box No. V DESIGNATIONS: | | | | |
|---|---|---|---|--|
| The filing of this request of for the grant of every kind of | constitutes under Rule 4.9(a), the design of protection available and, where applica | gnation of all Contracting Stable, for the grant of both region | ates bound by the PCT on tonal and national patents. | the international filing date, |
| However, DE Germany is not | designated for any kind of national prote | ction | | |
| KR Republic of Kor | ea is not designated for any kind of natio | onal protection | | |
| RU Russian Federat | ion is not designated for any kind of nation | onal protection | | |
| the national law, of an ear | ry be used to exclude (irrevocably) the des lier national application from which prior us in these and certain other states.) | signations concerned in order rity is claimed. See the Notes I | to avoid the ceasing of the e Box No. V as to the conseque | ffect, under nces of |
| Box No. VI PRIORI | TY CLAIM: | | | |
| The priority of the followin | g earlier application(s) is hereby claimed: | : | | |
| Filing date | | | Where earlier application is | : |
| of earlier applicat (day/month/year | ion Number of earlier application | national application: country or Member of WTO | regional application:* regional Office | international application: receiving Office |
| item (1) 18 July | 2003 0316760.8 | GB | | |
| item (2) | | | | |
| item (3) | | | | |
| Further priority clair | ns are indicated in the Supplemental Box | | | 1 |
| The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office) identified above as: all items | | | | |
| Box No. VII INTERNATIONAL SEARCHING AUTHORITY | | | | |
| Choice of International Searching Authority (ISA) (if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used): | | | | |
| ISA/ | | | | |
| Request to use results of earlier search; reference to that search (if an earlier search has been carried out by or requested from the International | | | | |
| Searching Authority): Date (day/month/year) Number Country (or regional Office) | | | | |
| Box No. VIII DECLARATIONS | | | | |
| The following declarations are contained in Boxes Nos. VIII (i) to (v) (mark the applicable check-boxes below and indicate in the right column the number of each type of declaration): Number of declarations | | | | |
| Box No. VIII (i) | Declaration as to the identity of the inve | | : | |
| Box No. VIII (ii) Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent | | | | |
| Box No. VIII (iii) Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application | | | | |
| Box No. VIII (iv) | Declaration of inventorship (only for the purposes of the designation of the United : States of America) | | | |
| Box No. VIII (v) Declaration as to non-prejudicial disclosures or exceptions to lack of novelty | | | | |
| | | | | |

Sheet No ..4..

| Box No. IX CHECK LIST; LANGUAGE OF | | | |
|--|--|---------------------------|--|
| This international application contains: (a) in paper form, the following number of | This international application is accompanied by the following item(s) (mark the applicable check-boxes below and indicate in | Number | |
| sheets: | right column the number of each item): | of items | |
| request (including | i. fee calculation sheet | | |
| declaration sheets) : 4 | 2. original separate power of attorney | • | |
| description (excluding 20 | 3. original general power of attorney | : | |
| sequence listings and /or | 4. x copy of general power of attorney; reference number, | : | |
| tables related thereto): | if any: | 3 | |
| claims 4 | 5. statement explaining lack of signature | : | |
| abstract : 1 | 6. priority document(s) identified in Box No. VI as | : | |
| drawings 0 | item(s): | | |
| Sub-total number of sheets : 29 sequence listings : | 7. translation of international application into (language) | | |
| tables related thereto : 0 (for both, actual number of | 8. separate indications concerning deposited microorganism or other biological material | : | |
| sheets if filed in paper form, whether or not also filed in | 9. sequence listing in computer readable form (indicate type and number of carriers) | : | |
| computer readable form; see (c) below) | (i) copy submitted for the purposes of international search | | |
| Total number of sheets 29 | Rule 13ter only (and not as part of the international app | * | |
| (b) only in computer readable form (Section 801(a)(i)) | (ii) (only where check-box (b)(i) or (c)(i) is marked in left of additional copies including, where applicable, the copy purposes of international search under Rule 13ter | | |
| (i) sequence listing (ii) tables related thereto | (iii) together with relevant statement as to the identity of the or copies with the sequence listing mentioned in left co | | |
| (c) also in computer readable form | 10. tables in computer readable form related to sequence listi | | |
| (Section 801(a)(ii)) | (indicate type and number of carriers) | | |
| (i) sequence listing (ii) tables related thereto | (i) copy submitted for the purposes of international search Section 802(b-quater) only (and not as part of the inter | national : | |
| Type and number of carriers (diskette, | application) | | |
| CD-ROM, CD-R or other) on which are contained the | (ii) (only where check-box (b)(ii) or (c)(ii) is marked in left additional copies including, where applicable, the copy purposes of international search under Section 802(b-q | for the | |
| sequence listing: | | • | |
| tables related thereto: | or copies with the tables mentioned in left column | i the copy . | |
| (additional copies to be indicated under items 9(ii),and/or 10(ii), in right column): | 11. other (Specify) | | |
| | | | |
| Figure of the drawings which should accompany the abstract: | Language of filing of the international application: English | | |
| Box No. X SIGNATURE OF APPLICANT, AGENT Next to each signature, indicate the name of the person sign the request) | ning and the capacity in which the person signs (if such espacity is Tan Stevens | · · | |
| | For Receiving Office use only | | |
| Date of actual receipt of the purported international application: | | 2. Drawings | |
| mornational application. | | received | |
| Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application: | | not received | |
| Date of timely receipt of the required corrections under PCT Article 11(2): | | | |
| 5. International Searching Authority (if two or more are competent): | 6. Transmittal of search copy delayed until search fee is paid | | |
| For International Bureau use only | | | |
| Date of receipt of the record copy by the international Bureau: | | | |
| DOTE 0 (10) (1 - 4 - 1 1) (1 2004) | | See Notes to request form | |